



MECHANICAL/PLUMBING PERMIT APPLICATION

Planning & Community Development

PARCEL INFORMATION (Include all parcel(s) information. Attach additional sheets, if necessary.)

Project Address: _____
(Leave blank if address is not assigned)

Parcel Number (Property Tax Account Number): _ _ _ _ _ -- _ _ _ _ _

Legal Description: _____

PROPERTY OWNER INFORMATION

Name: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _ _ _ _ _ -- _ _ _ _ _ Cell Phone: _ _ _ _ _ -- _ _ _ _ _

Owner's Authorized Agent: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _ _ _ _ _ -- _ _ _ _ _ Cell Phone: _ _ _ _ _ -- _ _ _ _ _

PROJECT DESCRIPTION: _____

MECHANICAL CONTRACTOR INFORMATION

Company Name: _____ Email: _____

Contact Person: _____ Contact Phone: _ _ _ _ _ -- _ _ _ _ _

Address: _____ City: _____ State: _____ Zip: _____

Contractor's Registration No.: _ _ _ _ _ Expiration Date: _ _ / _ _ / _ _

PLUMBING CONTRACTOR INFORMATION

Company Name: _____ Email: _____

Contact Person: _____ Contact Phone: _ _ _ _ _ -- _ _ _ _ _

Address: _____ City: _____ State: _____ Zip: _____

Contractor's Registration No.: _ _ _ _ _ Expiration Date: _ _ / _ _ / _ _

I am the property owner or authorized agent of the property owner. I certify that to the best of my knowledge, the information submitted in support of this permit application is true and correct. I certify that I will comply with all applicable City of Shoreline regulations pertaining to the work authorized by the issuance of a permit. I understand that issuance of this permit does not remove the owner's responsibility for compliance with state or federal laws regulating construction or environmental laws. I grant permission for City staff and agents to enter areas covered by this permit application for the sole purpose of inspecting these areas in order to process this application and to enforce code provisions related to the issued permit.

Signature _____ / _____ Date _____
Property Owner and/or Authorized Agent

17500 Midvale Avenue North, Shoreline, Washington 98133-4905

Telephone (206) 801-2500 Fax (206) 801-2788 pcd@shorelinewa.gov

The Development Code (Title 20) is located at mrsc.org



MECHANICAL EQUIPMENT AND PLUMBING FIXTURE WORKSHEET

☐ Commercial

☐ Residential

MECHANICAL/HEATING EQUIPMENT	Count	PLUMBING FIXTURES	Fixture Count
Air conditioner		Backflow prevention devices	
Air handler		Bath tub	
Boiler/Refrigeration system/Radiant floor		Clothes washer	
Duct systems		Dishwasher	
Evaporative coolers		Drinking fountain	
Fireplace, residential		Electric water heater	
Gas clothes dryer		Floor drains/Sumps	
Gas log, gas insert, and/or gas fireplace		Floor sink	
Gas range		Hose bib	
Gas water heater		Lawn sprinkler/Irrigation system	
Gas-oil furnace/Appliance		Roof drain/Rain leader (except residential)	
Gas piping outlets (number of gas connections)		Shower	
Heat pump		Sink/Lavatory	
Liquefied Petroleum Gas (LPG) under 125 gallons		Toilet/Water closet	
Miscellaneous fuel burning appliance		Urinal/Bidet	
Residential range hood - <input type="checkbox"/> Type I hood <input type="checkbox"/> Type II hood		Waste/Grease interceptor	
Ventilating fans		Water service line	
Wood or pellet stove/insert			
Other:		Other:	
TOTAL PIECES OF EQUIPMENT AND/OR OUTLETS		TOTAL FIXTURES	
Total Equipment – 4		Total Fixtures – 4	
X \$11.25		X \$11.25	
+ \$149.50 (residential) or \$448.50 (commercial)		+ \$149.50	
TOTAL FEE		TOTAL FEE	
MECHANICAL FEES		PLUMBING FEES	
Residential Mechanical Systems	1-hour minimum (\$149.50) includes 4 pieces of equipment, \$11.25 per piece of equipment over 4	Plumbing Systems	1-hour minimum (\$149.50) includes 4 fixtures, \$11.00 per fixture over 4
Commercial Mechanical Systems	3-hour minimum (\$448.50) includes 4 pieces of equipment, \$11.25 per piece of equipment over 4	Backflow Prevention Devices not part of a plumbing system permit	1-hour minimum (\$149.50) includes 4 fixtures, \$11.25 per fixture over 4
All other mechanical/plan review	Hourly rate, 1-hour minimum (\$149.50)	All other plumbing/plan review	Hourly rate, 1-hour minimum (\$149.50)
Gas Piping not part of a mechanical system permit	1-hour minimum (\$149.50) includes 4 fixtures, \$11.25 per fixture over 4	Provide one copy of plans approved by King County Public Health for school and food handling projects	
PLEASE INDICATE ALL MECHANICAL EQUIPMENT AND/OR PLUMBING FIXTURES TO BE INSTALLED			

1/2012

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